



Allied Health • Durable Medical Equipment and Medical Supplies

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Medi-Cal Training Seminars

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New and Revised DME Forms

The *Certificate of Medical Necessity* (DHS 6181) form has been revised and three additional versions specific to wheelchairs and scooters have been created. Effective immediately, providers must complete the applicable DHS 6181 form when submitting documentation to support *Treatment Authorization Requests* for Durable Medical Equipment (DME):

- DHS 6181: *Certificate of Medical Necessity for All Durable Medical Equipment (DME) (Except Wheelchairs and Scooters)*
- DHS 6181-A: *Certificate of Medical Necessity for a Manual Wheelchair, Standard or Custom*
- DHS 6181-B: *Certificate of Medical Necessity for a Motorized Wheelchair, Custom or Standard*
- DHS 6181-C: *Certificate of Medical Necessity for a Power Operated Vehicle (POV) AKA Scooter, Standard or Bariatric*

Copies of these forms are available in the Part 2 manual.

The updated information is reflected on manual replacement page dura 4 (Part 2). The forms can be found at the end of the dura section.

Intermittent Catheter Billing Change

Effective for dates of service on or after July 1, 2006, providers must attach either a manufacturer's catalog page or invoice with their paper claims for pricing, or reference the manufacturer's catalog page on their electronic claims when billing the following intermittent catheter codes: 9993E, 9993F, 9993H and 9993J.

CCS Service Code Groupings (SCG) Update

Effective for dates of service on or after July 1, 2006, a number of codes are added to the California Children's Services (CCS) Service Code Grouping (SCG) 06. The effective date for these codes is designated by the symbol "^^".

Codes 99222 and 99223 were previously added to SCG 06 in error, and are end-dated for dates of service on or after July 1, 2006.

Reminder: SCG 02 includes all the codes in SCG 01; SCG 03 includes all the codes in SCG 01 and SCG 02; and SCG 07 includes all the codes in SCG 01. These same "rules" apply to end-dated codes.

The updated information is reflected on manual replacement page cal child ser 17 (Part 2).

Medical Supplies Updates

Effective for dates of service on or after June 1, 2006, providers can purchase and bill for waterproof sheeting from the following manufacturers using the established Maximum Acquisition Cost (MAC).

Providers will have a three-month transition period, from June 1, 2006 through August 31, 2006, to make necessary adjustments to their stocks. Quantity limitations remain unchanged during this transition period, and providers can dispense both contracted and non-contracted waterproof sheeting products using billing code 9947A. Beginning with dates of service on or after September 1, 2006, the quantity limit for waterproof sheeting will be increased to three in a 365-day period without prior authorization.

Also, effective for dates of service on or after September 1, 2006, all manufacturers' products not included in a contract will not be granted a *Treatment Authorization Request* (TAR) and will no longer be reimbursable under the Medi-Cal program.

<u>Manufacturer</u>	<u>Description</u>	<u>Stock Number</u>	<u>UPC Code</u>	<u>Maximum Acquisition Cost</u>	<u>Billing Code</u>
G. Hirsch & Company Inc.	Poly/Vinyl Quilted, with Anchor band, 39" x 75"	SR 832	000891832001	\$13.8000	9947A TI
	Cooltex with Bactishield, 36" x 72"	SR 837	000891837006	\$13.8000	9947A TI
Humanicare International, Inc.	Sheeting, Waterproof, Quilted rubber free hypoallergenic 36" x 80"	36080	(01)000441563 60809	\$13.8000	9947A VS
	Sheeting, Waterproof, Quilted rubber free hypoallergenic 39" x 75"	39075	(01)000441563 90752	\$13.8000	9947A VS

These updates are reflected on manual replacement page mc sup lst3 14 (Part 2).

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Remove and replace:	appeal form 1/2 * cal child ser 17/18 children 3/4 * dura 3/4
Insert after the <i>Durable Medical Equipment (DME): An Overview</i> section:	DHS 6181: <i>Certificate of Medical Necessity for All Durable Medical Equipment (DME) (Except Wheelchairs and Scooters) 1/2 (new)</i> DHS 6181-A: <i>Certificate of Medical Necessity for a Manual Wheelchair, Standard or Custom Standard 1/2 (new)</i> DHS 6181-B: <i>Certificate of Medical Necessity for a Motorized Wheelchair, Custom or Standard 1/2 (new)</i> DHS 6181-C: <i>Certificate of Medical Necessity for a Power Operated Vehicle (POV) AKA Scooter, Standard or Bariatric 1/2 (new)</i>
Remove and replace:	hcpcs iii 3/4 *
Remove:	mc sup lst3 13 thru 17
Insert:	mc sup lst3 13 thru 18
Remove and replace:	medi non hcp 1 thru 3 *
Remove:	modif app 3 thru 10
Insert:	modif app 3 thru 9 *

* Pages updated due to ongoing provider manual revisions.